

You visit people in the hospital as a representative of the church, to express love and care for them when they are feeling fearful and anxious. Your friendly visit and expression of concern can help in the healing process, for there is an element of healing in the awareness that we are cared for and are not alone. You remind the patient of the spiritual health and resources God offers us at all times. You are embodying the message of healing brought by Jesus.

History and Background

Many societies have recognized the relation between healing and faith. In many religions the priest functioned also as the healer.

Many stories of Jesus are of his healing presence and his compassion for the sick. Jesus said, "... I was sick and you took care of me ... as you did it to one of the least of these, ... you did it to me" (Matthew 25:36, 40).

Early in the church's life, this command for concern for the sick was taken seriously. "Are any among you sick? They should call for the elders of the church and have them pray over them, anointing them with oil in the name of the Lord" (James 5:14).

The word "hospital" is derived from Medieval Europe when "Knight Hospitalers" assisted weary pilgrims and crusaders. As the

hospital developed into a place for healing, the church established hospitals. Church leaders have served as administrators, chaplains, deaconesses and volunteers in hospitals. Continuing to recognize the spiritual aspects of healing, church members carry out Jesus' commandment to love one another by visiting hospital patients.

Common Practices

Many people see hospital visitation as a significant part of the church's ministry. That's why church members who are not visited complain, criticize and feel hurt. They understand the biblical imperative for visiting the sick and expect others to take it seriously.

Often the pastor does most of the hospital visiting. You can show your concern by letting the pastor know about people who are sick. You'll need to do that even if you visit, for pastors would rather be told three times than not at all when members are sick.

In churches that have lay leaders who are responsible for special relationships with assigned members (family clusters or shepherd programs), these leaders may visit lay people from their geographical area or family cluster. These churches with visitation programs are likely to have a report form to let the pastor know when people have made hospital visits.

Deacons or elders are often responsible for visitation. In addition, those who deliver flowers to patients and other church members sometimes also feel the inner call to visit.

Responsibilities

Being a responsible hospital visitor includes:

- Being part of a planned program of visitation from the church or checking with the pastor to insure that several people from the church don't go at one time.
- Checking with the family, patient or hospital before visiting to see whether the patient feels up to receiving visitors.
- Visiting only during visiting hours set by the hospital.
- Not visiting if you are sick. Don't go even if you think you might be coming down with something or have been exposed to a communicable disease. What is minor to you may not be to a sick person vulnerable to infection, and the patient doesn't need any more trouble, however minor.
- Not bringing cut flowers (the water can be a carrier of bacteria) or food (it may not be within diet restrictions). Potted plants, cards and notes from church school classes, small books and reassuring devotional booklets will remind the patient of the church's concern after you have gone.

- Stopping at the nurses' desk on the patient's floor to find out whether there are any precautions you need to take.
- Obeying all signs, such as "no smoking," "no visitors" and "isolation."
- At the patient's room, knocking on a closed door and waiting for an invitation to enter or easing your way in gently if the door is open. If hospital staff are with the patient, indicate that you will come back when they are finished.
- Identifying yourself and the church you are representing to the patient.
- Trying to sit where the patient can easily see you. Never sit on the patient's bed, and try to avoid jarring the bed.
- Observing carefully and trying to interpret the meaning of tubes, bottles, equipment, voice tone, cards and flowers. Don't ask lots of questions about the equipment or fiddle with it. Listen for feelings behind words.
- Focusing your attention on the patient. Talking with other people in the room is appropriate only if the patient is comfortable with it.
- Doing more listening than talking. Encourage the patient to express what he or she is feeling, even if it is anger, resentment, fear or disgust. When you do talk, avoid telling about your problems and illnesses or giving medical advice. Remember you aren't there to

preach, convert, win arguments or entertain.

- Making the visit brief. A few minutes of conversation can be tiring to a sick person. It is better to err on the side of brevity than to stay too long.
- Trying to appear calm and unhurried.
- Returning your chair or anything you moved to its proper place unless the patient asks you not to.
- Reporting the visit to the pastor, using a report form if your church has one.
- Not forgetting the patient when the hospital stay is over. Short phone calls, visits at home or cards relieve the tedium of recuperation away from the hustle and bustle of the hospital and remind people that you care.

Skills and Attributes Needed

- Ability to listen.
- Nonjudgmental and accepting nature.
- Willingness to invest the time needed for an unhurried visit.
- Ability to empathize with the patient, to understand what it is like to be sick and in the hospital.
- Sincere cheerfulness without inappropriate optimism.
- Awareness of the role your concerned presence plays.
- Faith in God and God's presence.

Ways to Increase Skills, Knowledge and Effectiveness

- Use **Called to Care: A Notebook for Lay Caregivers**, developed by Parish Life and Leadership, to help your church organize a stronger caregiving ministry, train church members to make effective visits and provide resources for the caregiver, including material to leave with the patient. Order from United Church of Christ Resources. Telephone, toll-free, 800-537-3394. See also www.ucc.org/ministers.
- Attend workshops on hospital visitation. Your church could organize one using a hospital chaplain as a resource person.
- Read **The Caring Church: A Guide for Lay Pastoral Care** by Howard W. Stone (Minneapolis: Augsburg/ Fortress, 1991); and **Bedside Manners: A Practical Guide to Visiting the 111** by Katie Maxwell (Grand Rapids, MI: Baker Book House, 3rd ed., 1990).
- Practice listening and observing when you are in the other settings.
- Ask someone who has been hospitalized about what was helpful.
- Talk to hospital staff members about dos and don'ts for hospital visitors. Ask them questions about procedures or equipment that make you uncomfortable during visits.

- Plan time for your own regular spiritual renewal through Bible study, meditation and prayer.

Issues Facing the Church

- The goal of a visit is to share a relationship of common love and faith. How does the offering of a prayer, or scripture and a prayer, fit into that relationship? How can you be certain that you are filling the need of the person you are visiting rather than your own needs? What is your own comfort or discomfort with such a request or offer? The pastor's role creates a license for offering communion and prayer. How do lay people deal with these issues?
- Some hospitals do not allow visitors other than clergy or family. How can lay people show their care and concern and participate in the healing process in that situation?
- Being sick or anticipating surgery tends to make people feel vulnerable, anxious and fearful. How do you deal with people who want to use this vulnerability and fear to convert, or "give religion" to hospital patients?

Questions

- What are the reasons lay people visit hospital patients as representatives of the church?

- Who in your church besides the pastor makes hospital visits?
- Does your church have a planned method of lay visitation? If not, what could such a program add to the life of your church?
- How would you define "a short visit"? Would your definition be the same if you were planning to visit or to be the recipient of a visit?
- Is there anything about a hospital visit that makes you particularly uncomfortable? With whom could you discuss this?